

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | ML | | 08-10-01 |
| O.I.P.E. CLASSIFIER | | 49 | 9/20/01 |
| FORMALITY REVIEW | TH | 953 | |
| RESPONSE FORMALITY REVIEW | Rm | 751 | 01-15-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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530
08-13-01
1/29/02
01/16/02